PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax (571)-273-2885

appropriate. All further indicated unless correct maintenance fee notificated		ng the Patent, advance of herwise in Block 1, by (orders and notification of n (a) specifying a new corres	ON FEE (if required), naintenance fees will b pondence address; and	Blocks 1 through 5 s e mailed to the current or (b) indicating a sepa	hould be completed where correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
27123		/2008			_	
MORGAN & FINNEGAN, L.L.P. 3 WORLD FINANCIAL CENTER NEW YORK, NY 10281-2101				Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
			•			(Depositor's name)
	•					(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	ATI	ORNEY DOCKET NO.	CONFIRMATION NO.
10/830,169 04/22/2004		Hiroyuki Shinbata		1232-5388	8160	
TITLE OF INVENTION: DIAGNOSIS SUPPORT APPARATUS AND IMAGE PROCESSING METHOD						
	•					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	· \$300	\$0	\$1740	06/03/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
WOLDEMARIAM, AKILILU K 2624			382-260000			
 Change of correspond CFR 1.363). 	ence address or indicatio	n of "Fee Address" (37	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys Morgan & Finnegan, Lill			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively,			
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME A	ND RESIDENCE DATA	TO BE PRINTED ON	THE PATENT (print or typ	e)		
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
CANON KABUSHIKI KAISHA TOKYO, JAPAN						
Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government						
ta. The following fee(s) a Issue Fee Publication Fee (N Advance Order - #	To small entity discount p		 D. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number			
5. Change in Entity Sta	tus (from status indicated	above)	overpayment, to Depos			
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
NOTE: The Issue Fee and nterest as shown by the I	d Publication Fee (if requeecords of the United Sta	ired) will not be accepte es Patent and Trademark	d from anyone other than the Office.	e applicant; a registered	attorney or agent; or th	e assignee or other party in
Authorized Signature	Math B	lat-		Date Mar	ch 10, 2008	
Typed or printed name	·	Blackburn		Registration No		
This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) in application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and ubmitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete his form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. 30x 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450. Juder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.						
						······································